

Application Data Sheet

Application Information

Application Type::	Regular
Subject Matter::	Utility
Suggested Classification::	
Suggested Group Art Unit::	
CD-ROM or CD-R?::	None
Number of CD disks::	
Number of Copies of CDs::	
Sequence Submission?::	Paper
Computer Readable Form (CRF)::	Yes
Number of copies of CRF::	2
Title::	BIOLOGICAL MATERIAL
Attorney Docket Number::	3007-1016-1
Request for Early Publication?::	No
Request for Non-Publication?::	No
Suggested Drawing Figure::	
Total Drawing Sheets::	29
Small Entity?::	Yes
Latin Name::	
Variety Denomination Name::	
Petition Included?::	No
Petition Type::	
Licensed US Gov't Agency::	
Contract or Grant Numbers::	
Secrecy Order in Parent Appl.?::	No

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: UNITED KINGDOM
Status:: Full Capacity
Given Name:: BRYAN
Middle Name:: PAUL
Family Name:: MORGAN
City of Residence:: CARDIFF
State or Province of Residence::
Country of Residence:: UNITED KINGDOM
Street of Mailing Address:: UNIVERSITY OF WALES COLLEGE OF
MEDICINE
HEATH PARK
City of Mailing Address:: CARDIFF
State or Province of Mailing Address::
Country of Mailing Address:: UNITED KINGDOM
Postal or Zip Code of Mailing Address:: CF14 1XN

Applicant Authority Type:: Inventor
Primary Citizenship Country:: UNITED KINGDOM
Status:: Full Capacity
Given Name:: NEIL
Middle Name:: KEVIN
Family Name:: RUSHMERE
City of Residence:: CARDIFF
State or Province of Residence::
Country of Residence:: UNITED KINGDOM
Street of Mailing Address:: UNIVERSITY OF WALES COLLEGE OF
MEDICINE
HEATH PARK
City of Mailing Address:: CARDIFF
State or Province of Mailing Address::
Country of Mailing Address:: UNITED KINGDOM

Postal or Zip Code of Mailing Address:: CF14 1XN

Applicant Authority Type:: Inventor
Primary Citizenship Country:: UNITED KINGDOM
Status:: Full Capacity
Given Name:: STEWART
Middle Name:: JAMES
Family Name:: HINCHLIFFE
City of Residence:: CARDIFF
State or Province of Residence::
Country of Residence:: UNITED KINGDOM
Street of Mailing Address:: UNIVERSITY OF WALES COLLEGE OF
MEDICINE
HEATH PARK
City of Mailing Address:: CARDIFF
State or Province of Mailing Address::
Country of Mailing Address:: UNITED KINGDOM
Postal or Zip Code of Mailing Address:: CF14 1XN

Applicant Authority Type:: Inventor
Primary Citizenship Country:: NETHERLANDS
Status:: Full Capacity
Given Name:: CARMEN
Middle Name:: WILMA
Family Name:: VAN DEN BERG
City of Residence:: CARDIFF
State or Province of Residence::
Country of Residence:: UNITED KINGDOM
Street of Mailing Address:: UNIVERSITY OF WALES COLLEGE OF
MEDICINE
HEATH PARK
City of Mailing Address:: CARDIFF
State or Province of Mailing Address::
Country of Mailing Address:: UNITED KINGDOM

Postal or Zip Code of Mailing Address:: CF14 1XN

Correspondence Information

Correspondence Customer Number:: 000466

Representative Information

Representative Customer Number::	000466
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Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This application	Division of	09/673,032	12/6/00
09/673,032	National Stage of	PCT/GB99/01085	4/8/99

Foreign Priority Information

Country::	Application Number::	Filing Date::	Priority Claimed::
GREAT BRITAIN	9807520.3	4/9/98	Yes

Assignment Information

Assignee Name:: UNIVERSITY OF WALES COLLEGE
OF MEDICINE

Street of Mailing Address:: HEATH PARK

City of Mailing Address:: CARDIFF

State or Province of Mailing Address::

Country of Mailing Address:: UNITED KINGDOM

Postal or Zip Code of Mailing Address:: CF14 1XN